	CHEDULE B (FEC FOIII 3X)	Use seperate schedule(s)		FOR LINE (check only					48 / 5	50	
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27		X 23 28b	24 280		25 29	26 30b	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									5	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) SOUTHERN COMPANY EMPLOYEES PA	•	<u></u>				<u> </u>				
۷.	Full Name (Last, First, Middle Initial) Mark Kennedy 06				Transaction ID: 60816.E892						
•	,					Date of Disbursement M M / D D / Y Y Y O O 6					
	Mailing Address Attn: James D. Loizeaux, Treasurer P.O. Box 49333										
	,	State Zip Code MN 55449-				Amount of Each Disbursement this Period					
	Purpose of Disbursement DIRECT CONTRIBUTION		Tr	•				. 3	0.000	00	
	Candidate Name MARK RAYMOND KENNEDY Category/ Type										
	Office Sought: House Disburse X Senate President State: MN District: 00	ment For: 2006 Primary X General Other (specify)		71	DIRECT CONTRIBUTION						
	Full Name (Last, First, Middle Initial)					Transaction ID: 60816,E911					
3.	Leadership In The New Century PAC				Date of Disbursement						
	Mailing Address LINC PAC 818 Connecticut Ave., Ste 1100					07 7 3 1 7 2 0 0 6					
	,	State Zip Code DC 20006-			Amoun	t of Each	Disburs	ement	this P	eriod	
	Purpose of Disbursement DIRECT CONTRIBUTION				1000.00						
	Candidate Name		ategory/ Type								
	Senate Yresident X	ment For: 2006 Primary General Other (specify) ▼ L/OTHER			DIREC	T CON	TRIBUT	TON			
	Full Name (Last, First, Middle Initial)	L/OTTILIT			Transa	ction ID:	: 60816	F896	 S		
Э.	Latham For Congress				Date of Disbursement O 7						
	Mailing Address Attn: Robert W. Brinton, Treasurer P.O. Box 71										
	City State Zip Code Clarion IA 50525-				Amount of Each Disbursement this Period						
	Purpose of Disbursement DIRECT CONTRIBUTION							1	000.0	00	
	Candidate Name THOMAS P LATHAM Category/ Type										
	Office Sought: X House Senate President State: IA District: 04	ment For: 2006 Primary X General Other (specify)	•		DIRECT CONTRIBUTION						
s	UBTOTAL of Disbursements This Page (optional) .					• •		5(0.000	0	
	OTAL This Period (last page this line number only)					-					
	CLAL THIS PERIOD HAST DAME THIS LINE NUMBER ONLY).										